

Applicant:	Hidetki IKARASHI, et al.	Docket No.:	50070-075
Title:	ILLUMINATING APPARATUS		
Date Sent:	10/28/2004	<input checked="" type="checkbox"/> Hand Carried	<input type="checkbox"/> Fax
		<input type="checkbox"/> Design	<input type="checkbox"/> Electronic
Transmittal Letter		<input type="checkbox"/> Cont.	<input type="checkbox"/> Cert. of Mailing
New Patent App	<input type="checkbox"/> Utility	<input type="checkbox"/> CIP	<input type="checkbox"/> PCT
Other:		<input type="checkbox"/> Div.	<input type="checkbox"/> RCE
<input type="checkbox"/> pages of Specification <input type="checkbox"/> pages of Claims <input type="checkbox"/> pages of Abstract <input type="checkbox"/> pages of Formal/Informal Drawings <input checked="" type="checkbox"/> Large Entity <input type="checkbox"/> Declaration/Power of Attorney <input type="checkbox"/> Recordation of Assignment/Security Agreement <input checked="" type="checkbox"/> Information Disclosure Statement <hr/> <input type="checkbox"/> Preliminary Amendment <input type="checkbox"/> Response to Missing Parts Notice <input type="checkbox"/> Resp. to Notice to Correct App. Papers <input type="checkbox"/> Certified Copy of Priority Doc. <input type="checkbox"/> Claim for Convention Priority <input type="checkbox"/> Response/Amendment to Office Action of <input type="checkbox"/> Request for month Extension of Time			
<input type="checkbox"/> Letter submitting _____ pages of drawings <input type="checkbox"/> Req. for Approval of Drawing Amendments <input type="checkbox"/> Req. for Oral Hearing <input type="checkbox"/> Nat. of Appeal <input type="checkbox"/> Rule 312 Amendment/Letter <input type="checkbox"/> Req. for Acknowledgement of Cited Art <input type="checkbox"/> Issue Fee <input type="checkbox"/> Publication Fee <input type="checkbox"/> Req. for Certificate of Correction <input type="checkbox"/> Maintenance Fee for _____ years after grant <input type="checkbox"/> Fee Address Indication Form <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Petition to Commissioner <input type="checkbox"/> Status Inquiry <input checked="" type="checkbox"/> Other Office Action			
CMS Descrip.:	<input type="checkbox"/> Charge Deposit Acct. 5004117\$ 180.00 Atty Init. SAB Tkp. # 4233 Secy. or Pl. Gveppumthara <hr/> 10-180.00		

THE PATENT AND TRADEMARK OFFICE DATE STAMPED HEREON IS ACKNOWLEDGEMENT THAT THE ITEMS, CHECKED ABOVE, WERE RECEIVED BY THE PTO ON THE DATE STAMPED.

REMINDER
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